

# REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL



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*Elise D. Bray*  
Elise D. Bray

COPY OF PAPERS  
ORIGINALLY FILED

Application Number : 09/370,601  
Filing Date : August 10, 1999  
Inventor(s) : Kristine B. Fuimaono  
Title : IRRIGATION PROBE FOR ABLATION DURING OPEN HEART SURGERY  
Group Art Unit : 3763  
Examiner Name : Cris Loiren Rodriguez  
Docket No. : 34063/KMO/W112 Date: June 18, 2002

## MAIL TO: Box RCE

This is a Request for Continued Examination (RCE) under 37 CFR § 1.114 of the above-identified application.

This application is **not** an application of the kind specified in 37 CFR § 1.114(e).

### 1. THE STATUS OF THE APPLICATION IS AS FOLLOWS:

- a. ☐ Pending (no review proceedings active)
- (1) ☐ An Action was mailed by the Office on ☐ as to which no appeal under 37 CFR § 1.191 has been filed and ☐ a response under 37 CFR § 1.116 was mailed on ☐ via Express Mail ☐ with certificate of mailing under 37 CFR § 1.8 ☐ that Action was a Final Rejection, the finality of which is to be withdrawn by this Request ☐ an appeal or civil action under 35 U.S.C. 141, 145 or 146 has been terminated
- (2) ☐ Allowed: the Notice of Allowance was mailed by the Office on ☐ the Issue Fee has not been paid ☐ the Issue Fee has been paid and a petition under 37 CFR § 1.313 was granted on ☐
- b. ☒ Pending (with review proceeding active)  
An appeal under 37 CFR § 1.191 has been filed. Applicant(s) hereby withdraw that appeal and request reopening of the prosecution of the application.

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**REQUEST FOR CONTINUED EXAMINATION (RCE)  
TRANSMITTAL**

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**Application No. 09/370,601**

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**2. SUBMISSION(S) REQUIRED (check at least one)**

**a. Previously submitted**

- ☐ Consider the amendments/reply under 37 CFR § 1.116 previously filed  
on ☐  
☐ Consider the arguments in the Appeal or Reply Brief previously filed on ☐  
☐ Other:

**b. Enclosed**

- ☒ Amendment/Reply  
☐ Affidavit(s)/Declaration(s)  
☐ Information Disclosure Statement  
☐ Documents under 37 CFR § 1.48  
☐ Petition for Extension of Time  
☐ Other:

The Examiner is requested to telephone the undersigned promptly following receipt and initial review of the application in light of the Submissions(s) for the conduct of, or the scheduling of, a telephone interview in the application.

Please address all correspondence to **CHRISTIE, PARKER & HALE, LLP, P.O. Box 7068, Pasadena, CA 91109-7068.**

Respectfully submitted,

CHRISTIE, PARKER & HALE, LLP

By 

Kathleen M. Olster  
Reg. No. 42,052  
626/795-9900

KMO/edb

**REQUEST FOR CONTINUED EXAMINATION (RCE)  
FEE CALCULATION SHEET**

**Application No. 09/370,601**

**PART I - BASIC FEE**

|           |                          |                          |        |
|-----------|--------------------------|--------------------------|--------|
| BASIC FEE | Small Entity<br>\$370.00 | Large Entity<br>\$740.00 | 740.00 |
|-----------|--------------------------|--------------------------|--------|

**Part II - ADDITIONAL CLAIMS (compared to application before RCE)**

|  | Claims<br>Remaining<br>After<br>Amendment | Highest<br>Number<br>Previously<br>Paid For | Number<br>Extra<br>Claims | Small<br>Entity Rate | Large<br>Entity Rate | FEE    |
|--|---|---|---------------------------|----------------------|----------------------|--------|
| Total Claims                                   | 52  | * 52  | 0                         | x \$9.00             | x \$18.00            | -0-    |
| Independent<br>Claims                          | 3   | ** 3  |                           | x \$42.00            | x \$84.00            | -0-    |
| First Presentation of Multiple Dependent Claim |   |   |                           | \$140.00             | \$280.00             | -0-    |
| TOTAL CLAIMS FEE                               |   |   |                           |                      |                      | \$0.00 |

List Independent Claims: 2, 6 and 40

\* IF THE "HIGHEST NUMBER OF TOTAL CLAIMS PREVIOUSLY PAID FOR" IS LESS THAN 20, WRITE "20" IN THIS SPACE.  
\*\* IF THE HIGHEST NUMBER PREVIOUSLY PAID OR IS 3 OR LESS, WRITE "3" IN THIS SPACE.

3. FEES (The RCE fee under 37 CFR § 1.17(e) is required by 37 CFR § 1.114 when the RCE is filed.)

a. Amount (total from Fee Calculation Sheet)

A check for \$740.00 is enclosed.

b. X The Commissioner is hereby authorized to charge any fees under 37 CFR 1.16 and 1.17 which may be required for this transaction to Deposit Account No. 03-1728. Please show our docket number with any charge or credit to our Deposit Account. **A duplicate copy hereof is enclosed.**